PATENT	APPLICATION FE	e dete	RMINATION	RECORD					
Effective October 1, 2000									

Application or Docket Number

NTL-3.2.145/35/9

(12818 Rousdau)

Ellective October 1, 2000									()	2818K	<u>ousoau</u>	
CLAIMS AS FILED - PART I (Column 1)			(Column 2)			SMALL ENTITY		OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS			26					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			26 minus 20= *		. 6			X\$ 9=		OR	X\$18=	108
INDEPENDENT CLAIMS			nus 3 =	* 4	7		X40=		OR	X80=	400	
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=	712-	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	-	TOTAL		OR	TOTAL	1218
Claims as amended - Part II]	OTHER	THÂN
(Column 1)				(Colu	mn 2)	(Column 3)	<u>_</u>	SWALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135=		OR	+270=		
								TOTAL		OR	TOTAL	
ADDIT. FEEADDIT. TEE												
AMENDMENT B	on norman	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	ar no material	HIGI NUN PREV	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***]=	╣	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	• 5
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3	<u>)</u>					
AMENDMENT C	o	CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDEN	IT CLAIM					1		-
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												<u> </u>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	nher Previously Pa	aid For" (Total o	r Indepen	dent) is the	e highest num	ber fo	ound in the ap	propriate bo	ox in c	olumn 1.	